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EUGENE MALISZEWSKYJ
ENGINEERING CONSULTANT

June 30 2015

ARTHUR BLOOSTON 1914 – 1999

ORIGINAL

writer's contact information sta@bloostonlaw.com 202-828-5562

REDACTED - FOR PUBLIC INSPECTION

VIA HAND DELIVERY

Accepted / Filed

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, S.W. Washington, DC 20554

JUN 30 2015

Federal Communications Commission Office of the Secretary

RE: Form 481 – Carrier Annual Reporting Data Collection, 2015

WC Docket No. 14-58

Dear Ms. Dortch:

Pursuant to sections 54.313(i) and 54.422(c) of the Commission's Rules, Pymatuning Independent Telephone Company (the Company) hereby submits a copy of its "FCC Form 481 – Carrier Annual Reporting Data Collection Form," as filed with the Universal Service Administrative Company. A copy is also being submitted to the appropriate state regulatory commission and tribal government, as further required by sections 54.313(i) and 54.422(c).

Pursuant to the Protective Order adopted by the Commission in this proceeding,² the Company requests confidential treatment for the financial information included in its report, as required by §54.313(f)(2), on the grounds that it is commercially sensitive information that is not normally released to the public. The Company also requests confidential treatment for its

No. of Copies rec'd__OY__ List ABCDE

^{1 47} CFR §§54.313 and 54.422.

² In the Matter of Connect America Fund, et al., PROTECTIVE ORDER, WC Docket No. 10-90, et al., DA-15-712, released June 17, 2015.

Progress Report on the Five Year Service Quality Plan pursuant to sections 0.457 and 0.459 of the Commission's Rules. A letter in support of the Company's request is attached hereto.

In accordance with the Protective Order and the Commission's rules, two redacted copies and one non-redacted copy have been submitted on paper via hand delivery to the Secretary's Office, two non-redacted copies have been submitted for hand delivery to Mr. Charles Tyler of the Telecommunications Access Policy Division, and a redacted copy has also been filed via the Electronic Comment Filing System.

If you have any questions, please do not hesitate to contact the undersigned.

Sincerely,

Salvatore Taillefer, Jr.

Counsel to Pymatuning Independent Telephone Company

CC:

Mr. Charles Tyler, Telecommunications Access Policy Division, Wireline Competition Bureau

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EUGENE MALISZEWSKYJ DIRECTOR OF ENGINEERING

June 30, 2015

ARTHUR BLOOSTON 1914 – 1999

> writer's contact information sta@bloostonlaw.com 202-828-5562

VIA HAND DELIVERY

Marlene H. Dortch, Secretary Federal Communications Commission 445 12th Street, S.W. Washington, DC 20554

RE: Form 481 – Carrier Annual Reporting Data Collection, 2015 WC Docket No. 14-58

Dear Ms. Dortch:

Pursuant to §0.457 and §0.459 of the Commission's rules, Pymatuning Independent Telephone Company (the "Company"), by its attorneys, hereby requests that certain materials and information be withheld from public inspection. Specifically, the Company requests confidential treatment of the Progress Report on the Five Year Service Quality Improvement Plan (the "Plan" or "confidential information") attached to its Form 481 filing.

In support of its request for confidential treatment and pursuant to the requirements under § 0.459(b) of the Commission's rules, the Company states the following:

1. Identification of the specific information for which confidential treatment is sought.

The Company seeks confidential treatment of the Progress Report on the Five Year Service Quality Improvement Plan, attachment 112 to the Form 481 filing accompanying this letter, which contains sensitive financial information about the Company as well as information about the Company's projected network improvements and upgrades for voice and broadband services during the period from 2015 through 2019.

2. Identification of the Commission proceeding in which the information was submitted or description of the circumstances giving rise to the submission.

The documents are being submitted as part of the annual Eligible Telecommunications Carrier Report (Form 481) mandated by section 54.313 of the Commission's rules.

3. Explanation of the degree to which the information is commercial or financial, or contains a trade secret or is privileged.

The data described is highly confidential and sensitive commercial and financial information which constitutes trade secrets or sensitive commercial and financial information that "would customarily be guarded from competitors," and is therefore exempted from mandatory disclosure under FOIA Exemption 4 and Section 0.457(d) of the Commission's rules.²

4. Explanation of the degree to which the information concerns a service that is subject to competition.

The Plan relates to voice and broadband services provided by the Company that are subject to competition from competitive local exchange carriers, cable television system operators, electric power utilities, fixed and mobile wireless service providers, and/or satellite carriers.

5. Explanation of how disclosure of the information could result in substantial competitive harm.

Disclosure of the confidential information is likely to result in substantial competitive harm to the Company because the confidential information could provide competitors with commercially sensitive insights related to the Company's operations, service offerings, and costs.

6. Identification of any measures taken by the submitting party to prevent unauthorized disclosure.

The Company does not make the Progress Report on the Five Year Service Quality Improvement Plan or any of the information contained therein publically available in any way and further limits internal access to key employees subject to strict non-disclosure obligations.

7. Identification of whether the information is available to the public and the extent of any previous disclosure of the information to third parties.

The Company does not make the confidential information available to the public and it has not previously allowed disclosure of the confidential information to third parties that are not otherwise bound by confidentiality obligations.

¹ *Id.* § 0.457(d)(2). ² 5 U.S.C. § 552(b)(4): 47 C.F,R. § 0.457(d).

8. Justification of the period during which the submitting party asserts that the material should not be available for public disclosure.

The confidential information should be treated as confidential for an indefinite period, as the Company will always be subject to competition and the competitive harms associated with the disclosure of the confidential information.

In order to provide adequate protection from public disclosure, the Commission should strictly limit distribution of the confidential information within the Commission on a "need to know" basis and not allow any distribution outside of the Commission. In the event that any person or entity outside the Commission requests disclosure of the confidential information, the Company requests that it be so notified immediately so that it can oppose such request or take other action to safeguard its interests as it deems necessary.

Please direct any questions regarding this submission to the undersigned.

Respectfully submitted,

Salvatore Taillefer, Jr.

Counsel for

Pymatuning Independent Telephone

Company

| FCC Fo | orm 481 - Carrier Annual Reporting Data Collection Form | | | | FCC Form 481 OMB Control No. July 2013 | 3060-0986/OIMB (CONTO) | No. 3060-0819 |
|------------------|--|--------------------------------|-------------|---|--|----------------------------------|--|
| <010> | Study Area Code | 170200 | | | matik kerindar Cikili | | |
| <015> | Study Area Name | PYMATUNING I | NO TEL | | | | |
| <020> | Program Year | 2016 | | | | | |
| <030> | Contact Name: Person USAC should contact with questions about this data | Amanda Moline | | | | | |
| <035> | Contact Telephone Number: Number of the person identified in data line <030> | 9044037533 e | xt. | ···· | | | |
| <039> | Contact Email Address: Email of the person identified in data line <030> | amolina@towne | es,net | · · · · · · · · · · · · · · · · · · · | | | |
| ANNU | AL REPORTING FOR ALL CARRIERS | | | | | 54.313 Completion Required | 1 2 1 3 KK D. 25 3 7 KK D - |
| P. I. I. C. | | AND REAL PROPERTY OF THE PARTY | ASSESSED OF | Carrie Contraction of | NAME OF TAXABLE PARTY. | (check box wh | THE RESIDENCE OF THE PARTY OF T |
| <100> | Service Quality Improvement Reporting | | | (complete attached work | sheetj | _ | 111111 |
| <200> | Outage Reporting (voice) | | | (complete attached work | sheet) | / | |
| <210> <300> | Unfulfilled Service Requests (voice) - check box if no | outages to repor | t | | | · / | 888886 |
| <310> | Detail on Attempts (voice) | | | | | | Min |
| | | | | | (attach descripti | ve document) | |
| <320> | Unfulfilled Service Requests (broadband) | | | | | / | REFERE |
| <330> | Detail on Attempts (broadband) | : 45 | | | | | THE STATES |
| | 1 | | | | (attach descrip | tive document) | |
| <400> | Number of Complaints per 1,000 customers (voice) | | | | _ | | |
| <410> | Fixed 0.0 | | | | | / | 1 |
| <420> <430> | Mobile 0.0 Number of Complaints per 1,000 customers (broadb | | | | | | <u> </u> |
| <440> | - Fixed 0.0 | and) | -9 | | | | 11/1/2/1/2 |
| <450> | Mobile 0.0 | | | | | | |
| <500> | Service Quality Standards & Consumer Protection Ru 170200pa510.pdf | les Compilance | , | (check to indicate certific | otlon) | | / |
| <510> | | 73 | | fattoched descriptive of | locument) | / | 1 |
| <600> | Functionality in Emergency Situations | | | (check to indicate certific | ation) | | |
| | 170200pa610.pdf | | | | | | |
| <610> | ž | | | fattached descriptive docu | ment) | | V . |
| <700> | Company Price Offerings (voice) | | | (complete attached work | thout | 7 | SHEETEN. |
| <710> | Company Price Offerings (broadband) | | | (complete attached work | | | 18 11 11 11 |
| <800> | Operating Companies and Affiliates | <u>(a</u> | | (complete attached work | | | / |
| | Tribal Land Offerings (Y/N)? Voice Services Rate Comparability Certification | | (if yes | , complete attached work | heet) | | |
| <1010> | | | | (attoch descriptive docum | nestj | | anna. |
| <1100> | Certify whether terrestrial backhaul options exist (Ye | s or No) | | (If not, check to Indicate | certification I | | 488888 |
| <1110> | Account of the second of the s | , 6 | U | (complete attached works | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | Terms and Condition for Lifeline Customers | | | (complete attached works | | 1111111 | / |
| | Price Cap Carriers, Proceed to Price Cap Additional Do | ocumentation \ | Workshe | eet | | | |
| ×2000 | Including Rate-of-Return Carriers affiliated with Price | Cap Local Exc | | | | | A G B: B B |
| <2000> <2005> | | | | (check to indicate certifica (complete attached works | (125°C) | | 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 |
| | Rate of Return Carriers, Proceed to ROR Additional De | ocumentation ' | | STATE OF THE STATE OF THE STATE OF | | | |
| <3000> <3005> | | | | (check to indicate certifica (complete attached works) | | | 10000 |

| | rvice Quality Improvement Reporting lection Form | | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|-------|--|-----------------------|--|
| <010> | Study Area Code | 170200 | |
| <015> | Study Area Name | PYMATUNING IND TEL | |
| <020> | Program Year | 2016 | |
| <030> | Contact Name - Person USAC should contact regarding this data | Amanda Molina | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 9044037533 ext. | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | amolina@townes.nec | ALL CONTROL OF THE CO |
| <110> | Has your company received its ETC certification from the FCC? | (yes/no) O |) |
| <111> | If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC? | (yes/no) O C |) |
| | if your answer to Line <111> is yes, then you are required to file a progress report, on line <1.12> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. | . 170200pall2.pdf | |
| <112> | Attach Five-Year Service Quality Improvement Plan or, In subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your of CETC which only receives frozen support, your progress report is only required to address voice telephony service. | company is a | 5 5 88 |
| | Please select the appropriate responses below (Yes, No, Not Applicable) to confit that the attached document(s), on line 112, contains a progress report on its five service quality improvement plan pursuant to §54.202(a). The information shall submitted at the wire center level or census block as appropriate. | e-year | Name of Attached Document |
| <113> | Maps detailing progress towards meeting plan targets | Yes | |
| <114> | Report how much universal service (USF) support was received | Yes | |
| <115> | How much (USF) was used to improve service quality and how support was used to improve | | |
| <116> | How much (USF) was used to improve service coverage and how support was used to improve | | |
| <117> | How much (USF) was used to improve service capacity and how support was used to imp | rous applies apposits | |
| <118> | Provide an explanation of network improvement targets not met in the prior calendar year. | Yes Yes | |

| | vice Outage R ection Form | eporting (Vol | ice) | | | | | | | FCC Form 481 OMB Control No. 3060 July 2013 | -0986/OMB Control N | io. 3060-0819 |
|--------|------------------------------|----------------|------------------|------------------|--------------------|----------------------------------|-----------|-------------|---------|---|---------------------|---------------|
| <010> | | | | | 170200 | | | | | | | |
| <015>_ | | | | | PYMATUNING IND TEL | | | | | | | |
| <020> | Program Year | 4 | | | | 2016 | | | | | | |
| <030> | Contact Name | e - Person USA | C should contac | t regarding thi | s data | Amanda %olina 9044037533 ext. | | | | | | |
| <035> | Contact Telep | hone Number | - Number of pe | erson Identified | in data line <030> | | | | | | | |
| <039> | Contact Email | Address - Em | ail Address of p | erson identifier | in data line <030> | amolina@to | wnes.net | | | | | |
| <220> | <9> | <b1></b1> | <b2></b2> | <b3></b3> | <b4></b4> | <c1></c1> | <c2></c2> | <d>></d> | <e></e> | <f></f> | <g></g> | <h>></h> |

| <8> | <b1></b1> | <b2></b2> | <b3></b3> | <b4></b4> | <c1></c1> | <c2></c2> | <d></d> | <e></e> | <f></f> | <g></g> | <h>></h> |
|-----------------------------|----------------------|----------------------|--------------------|--------------------|---------------------------------|------------------------------|--|---|---|------------------------------|----------------------------|
| NORS Reference Number | Outage Start Date | Outage Start Time | Outage End Date | Outage End Time | Number of Customers Affected | Total Number of Customers | 911 Facilities Affected (Yes / No) | Service Outage Description (Check all that apply) | Did This Outage Affect Multiple Study Areas (Yes / No) | Service Outage Resolution | Preventative Procedures |
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| <010> | Study Area Co | de | | | 170200 | | | | |
| <015> | Study Area Na | ime | | | PYMATUNING | IND TEL | | -1 2/5/ | |
| <020> | Program Year | | | | 2016 | - CONTRACT | | | |
| <030> | Contact Name | - Person USAC should | contact regarding | ng this data | Amenda Mol | ina | | | |
| <035> | Contact Telep | hone Number - Number | er of person iden | tified in data line | <030> 9044037533 | ext. | | | |
| <039> | Contact Email | Address - Email Addre | ss of person ider | ntified in data line | <030> amolina@to | wnes.net | | | |
| | kalb | 42 | <33> | et numeroanson CASA | SERVERADORAMINATIONAL | steps to \$000 to the Lost by Manager Co. | tanan kesti berilah dia Gaba di Sar | er i Meter (Austriae) en en elle et et en elle et e | |
| <703> | State | Exchange (ILEC) | SAC (CETC) | ≪b1> Rate Type | Residential Local Service Rate | State Subscriber Line Charge | <b4> State Universal Service Fee</b4> | <b5> Mandatory Extended Area Service Charge</b5> | Total per line Rates and Fee |
| <703> | | | | | Residential Local | | | Mandatory Extended Area | |
| <703> | | | | | Residential Local | | | Mandatory Extended Area | |
| <703> | | | | | Residential Local | | | Mandatory Extended Area | |
| <703> | | | | | Residential Local | | | Mandatory Extended Area | |
| <703> | | | | | Residential Local | | | Mandatory Extended Area | |
| <703> | | Exchange (ILEC) | | Rate Type | Residential Local | State Subscriber Line Charge | | Mandatory Extended Area Service Charge | |
| <703> | | Exchange (ILEC) | | Rate Type | Residential Local | State Subscriber Line Charge | | Mandatory Extended Area Service Charge | |
| <703> | | Exchange (ILEC) | | Rate Type | Residential Local | State Subscriber Line Charge | | Mandatory Extended Area Service Charge | |
| <703> | | Exchange (ILEC) | | Rate Type | Residential Local Service Rate | State Subscriber Line Charge | State Universal Service Fee | Mandatory Extended Area Service Charge | |
| <703> | | Exchange (ILEC) | | Rate Type | Residential Local Service Rate | State Subscriber Line Charge | State Universal Service Fee | Mandatory Extended Area Service Charge | |
| <703> | | Exchange (ILEC) | | Rate Type | Residential Local Service Rate | State Subscriber Line Charge | State Universal Service Fee | Mandatory Extended Area Service Charge | |
| <703> | | Exchange (ILEC) | | Rate Type | Residential Local Service Rate | State Subscriber Line Charge | State Universal Service Fee | Mandatory Extended Area Service Charge | |

| La Con | ection Form | | | July 2013 | /OMB Control No. 3060-0819 |
|--------|---------------------------------|--|--------------------|-----------|----------------------------|
| <010> | Study Area Code | | 170200 | į. | (# |
| <015> | Study Area Name | | PYMATURING IND TEL | | |
| <020> | Program Year | | 2016 | | |
| <030> | Contact Name - Person USAC sh | ould contact regarding this data | Amanda Molina | | |
| <035> | Contact Telephone Number - No | umber of person identified in data line <030> | 9044037533 ext. | | |
| <039> | Contact Email Address - Email A | ddress of person identified in data line <030> | amolina@townes.net | | |
| | Account and the contract of | | 65 & 4D | | |

| State | Exchange (ILEC) | Residential Rate | State Regulated Fees | Total Rate and Fees | Broadband Service - Download Speed (Mbps) | Broadband Service - Upload Speed (Mbps) | Usage Allowance (GB) | Usage Allowance Action Taken When Limit Reached (select |
|---|-----------------|------------------|-------------------------|---------------------|---|--|-------------------------|---|
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| | erating Companies lection Form | | | | 3 FCC Form 481 OMB Control No. 3050-0986/OMB Control No. 3050-0819 July 2013 |
|-------|-----------------------------------|---|--------------------|--------------------|--|
| <010> | Study Area Code | | 170200 | | |
| <015> | Study Area Name | (8) | PYMATUNING IND TEL | | |
| <020> | Program Year | | 2016 | | |
| <030> | | USAC should contact regarding this data | Amanda Molina | MANAGER AND STREET | |
| <035> | | nber - Number of person identified in data line <030> | 9044037533 ext. | | |
| <039> | | Email Address of person identified in data line <030> | amolina@townes.net | | |
| <810> | Reporting Carrier | Pymatuning Independent Telephone Company | | <u> </u> | |
| <811> | Holding Company | Townes Telecommunications, Inc. | | | |
| <812> | Operating Company | Pywatuning Independent Telephone Company | | | NHW |
| <813> | | al> *** | | a2> | (43) |
| | | Affiliates | 1 : | SAC | Doing Business As Company or Brand Designation |
| | | | | | |
| | | | | | |
| | | | See attached | worksheet | |
| | | | See attached | worksheet - | |
| | * | | See attached | worksheet - | |
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| | | | See attached | worksheet - | |

| 44585-62FE2100/04/13 | oal Lands Reporting ection Form | PCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060- July 2013 | 1-0819 |
|----------------------|--|--|--------|
| <010> | Study Area Code | 170200 | |
| <015> | Study Area Name | PYMATUNING IND TEL | |
| <020> | Program Year | 2016 | |
| <030> | Contact Name - Person USAC should contact regarding this data | Amanda Moline | |
| <035> | Contact Telephone Number - Number of person identified in data line <030: | | |
| <039> | Contact Email Address - Email Address of person identified in data line <030 | > amolins@townes.net | |
| <910> | Tribal Land(s) on which ETC Serves | | |
| <920> | Tribal Government Engagement Obligation | Name of Attached Document | 9 |
| If your o | company serves Tribal lands, please select (Yes,No, NA) for each these boxes | | |
| to confi | rm the status described on the attached document(s), on line 920, | | |
| | strates coordination with the Tribal government pursuant to | Select Yes or No or | |
| 5 54.31 | 3(a)(9) includes: | Not Applicable | |
| <921> | Needs assessment and deployment planning with a focus on Tribal community anchor institutions. | | |
| <922> | Feasibility and sustainability planning; | | |
| <923> | Marketing services in a culturally sensitive manner; | | |
| <924> | Compliance with Rights of way processes | | |
| <925> | Compliance with Land Use permitting requirements | | |
| <926> | Compliance with Facilities Siting rules | | |
| <927> | | | |
| | Compliance with Environmental Review processes | | |
| <928> | Compliance with Cultural Preservation review processes | · · · · · · · · · · · · · · · · · · · | |
| <929> | Compliance with Tribal Business and Licensing requirements. | | |

| 344575838 | o Terrestrial Backhaul Reporting | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|-----------|--|--|
| <010> | Study Area Code | 170200 |
| <015> | Study Area Name | PYMATUNING IND TEL |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | Amanda Molina |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 9044037533 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | amolina@townes.net |
| <1120> | Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No). | |
| <1130> | Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 | |

| Lifeline | rms and Condition for Lifeline Customers ection Form | | | PCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|-----------|---|---------|--------------------|--|
| <010> | Study Area Code | | 170200 | |
| <015> | Study Area Name | | PYMATUNING IND TEL | * |
| <020> | Program Year | | 2016 | |
| <030> | Contact Name - Person USAC should contact regarding this data | | Amanda Molina | |
| <035> | Contact Telephone Number - Number of person identified in data line | e <030> | 9044037533 ext. | |
| <039> | Contact Email Address - Email Address of person identified in data lin | e <030> | amoline@townes.net | |
| | | ſ | 170200pa1210.pdf | |
| <1210> | Terms & Conditions of Voice Telephony Lifeline Plans | | | |
| | | l | | Name of Attached Document |
| <1220> | Link to Public Website | нттр | | |
| or the we | heck these boxes below to confirm that the attached document(s), on line 12 sbsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers must report: | 10, | ii. | ** * |
| <1221> | Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, | 1 | | |
| <1222> | Details on the number of minutes provided as part of the plan, | 1 | | |
| <1223> | Additional charges for toll calls, and rates for each such plan. | | | |

| Study Area Code 170209 Study Area Name 20209 Program Year 20210 Sontact Name - Person USAC should contact regarding this data 20210 Sontact Name - Person USAC should contact regarding this data 20210 Sontact Teiphone Number of person identified in data line <0300 Sontact Teiphone Number of person identified in data line <0300 Sontact Teiphone Number of person identified in data line <0300 Sontact Teiphone Number of So | Data Colle | ce Cap Carrier Additional Documentation ection Form Rote-of-Return Carriers affiliated with Price Cap Local Exchange Carriers | FCC Form A81 OMB Control No. 3060-0986/OMB Control No. 3060-0819 JUN 2013 |
|--|------------|--|--|
| Suppy Area Name 403Db Program Year A 203D Contact Name - Person USAC should contact regarding this data 403D Contact Name - Person USAC should contact regarding this data 403D Contact Telephone Number - Number of person identified in data line 403D Prove Parable Value - Person USAC should contact regarding this data 403D Contact Tiespid Address - Email Address of person identified in data line 403D Prove Parable Value - Person USAC should contact America Should report the Contact America Phase I support as set forth in 47 CFR § 54.313(b)(c),(d),(e). The Information reported on this form and in the documents attached below is accurate. Incremental Connect America Phase I support as set forth in 47 CFR § 54.313(b)(1)) 2010 2nd Year Certification (47 CFR § 54.313(b)(1)) 2011 2nd Year Certification (47 CFR § 54.313(b)(1)) Attachment (47 CFR § 54.313(b)(1)) Price Cap Carrier Receiving Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2012 2013 Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2014 2015 2015 Free Support Calculation (47 CFR § 54.313(c)(1)) 2015 2016 And future Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2016 2017 Price Cap Carrier Receiving Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2017 2018 2018 And future Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2018 2019 Price Cap Carrier Receiving Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2019 2019 Price Cap Carrier Cancel America CS Support (47 CFR § 54.313(c)(1)) 2019 2019 Price Cap Carrier Cancel America CS Support (47 CFR § 54.313(c)(1)) 2019 2019 2019 2019 2019 2019 2019 2019 | <010> | Study Area Code | |
| ### Appendix Person USAC should contact regarding this data ### Appendix Name - Person USAC should contact regarding this data ### Appendix Name - Person USAC should contact regarding this data ### Appendix Name - Person USAC should contact regarding this data ### Appendix Name - Person USAC should contact regarding this data ### Appendix Name - Person USAC should contact regarding this data ince <a ##="" \$4.313(b)(1)(d)="" \$4.313(b)(c)(d)(e).="" -="" 2011ab<="" 47="" accurate.="" america="" and="" appendix="" as="" attached="" below="" cfr="" connect="" contact="" documents="" entor="" for="" form="" forth="" href="### Appendix Name - Person USAC should contact regarding this data ince <td><015></td><td>Study Area Name</td><td></td> | <015> | Study Area Name | |
| Additional Position Appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of incremental Connect America Phase is support, America Phase is support as set forth in 47 CFR § 54.313(b)(c)(d)(e). The information reported on this form and in the documents attached below is accurate. Incremental Connect America Phase is support as set forth in 47 CFR § 54.313(b)(c)(d)(e). The information reported on this form and in the documents attached below is accurate. Incremental Connect America Phase is support as set forth in 47 CFR § 54.313(b)(c)(d)(e). The information reported on this form and in the documents attached below is accurate. Incremental Connect America Phase is support as set forth in 47 CFR § 54.313(b)(c)(d)(e). The information reported on this form and in the documents attached below is accurate. Incremental Connect America Phase is support Calculation (47 CFR § 54.313(b)(1))) Attachment (47 CFR § 54.313(b)(1))) Price Cap Carrier Receiving Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2013 Prozen Support Calculation (47 CFR § 54.313(c)(1)) 2014 2015 Prozen Support Calculation (47 CFR § 54.313(c)(1)) 2015 Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2016 Cap Carrier Forces Support Calculation (47 CFR § 54.313(c)(1)) 2017 Price Cap Carrier Cancel America (Capport (47 CFR § 54.313(c)(1)) 2018 Prozen Support Calculation (47 CFR § 54.313(c)(1)) 2019 Price Cap Carrier Forces Support Calculation (47 CFR § 54.313(c)(1)) 2010 Price Cap Carrier Forces Support Calculation (47 CFR § 54.313(c)(1)) 2011 Prozen Support Calculation (47 CFR § 54.313(c)(1)) 2012 Prozen Support Calculation (47 CFR § 54.313(c)(1)) 2013 Prozen Support Calculation (47 CFR § 54.313(c)(1)) 2014 Prozen Support Calculation (47 CFR § 54.313(c)(1)) 2015 Prozen Support Calculation (47 CFR § 54.313(c)(1)) 2016 Prozen Support Calculation (47 CFR § 54.313(c)(1)) 2017 Prozen Support Calculation (47 CFR § 54.313(c)(1)) 2018 Prozen Support Calculation (47 CFR § 54.313(c)(1)) 2019 Prozen Support | <020> | Program Year | |
| Context Telepiner Number - Num | <030> | Contact Name - Person USAC should contact regarding this data | |
| Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of incremental Connect America Phase Is support as set forth in 47 CFR § 54.313(b)(c),(d),(e). The information reported on this form and in the documents attached below is accurate. Incremental Connect America Phase Is support as set forth in 47 CFR § 54.313(b)(c),(d),(e). The information reported on this form and in the documents attached below is accurate. Incremental Connect America Phase Is support as set forth in 47 CFR § 54.313(b)(1)) Attachment (47 CFR § 54.313(b)(1)) Attachment (47 CFR § 54.313(b)(1)) Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.313(c)(1)) 2011a> Attachment (47 CFR § 54.313(c)(1)) Attachment (47 CFR § 54.313(c)(1)) 2012b 2013 Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2014 Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2015b Certification Support Calculation (47 CFR § 54.313(c)(1)) 2015c Certification Support Calculation (47 CFR § 54.313(c)(1)) 2017c Agriculture Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2018b Agriculture Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2019c Agriculture Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2019c Agriculture Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2019c Agriculture Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2019c Agriculture Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2019c Agriculture Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2019c Agriculture Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2019c Agriculture Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2019c Agriculture Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2019c Agriculture Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2019c Agriculture Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2019c Agriculture Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2019c Agriculture Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2019c Agriculture Frozen Support Ca | <035> | | Ananda Rollna |
| Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of incremental Connect America Phase I support, Figh Cost support to offset access charge reduce Connect America Phase I reporting 2010 2nd Year Certification (47 CFR § 54.313(b)(c),(d),(e). The information reported on this form and in the documents attached below is accurate. Incremental Connect America Phase I reporting 2010 2nd Year Certification (47 CFR § 54.313(b)(1)II) Attachment (47 CFR § 54.313(b)(1)III) Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.313(c)(1)) 2012 2013 Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2014 Prozen Support Calculation (47 CFR § 54.313(c)(1)) 2015 Seroen Support Calculation (47 CFR § 54.313(c)(1)) 2016 Prozen Support Calculation (47 CFR § 54.313(c)(1)) 2017 Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(c)(1)) 2018 Connect America Phase II Reporting (47 CFR § 54.313(c)) 2019 Service Support Used to Build Encodaband Connect America Phase II Reporting (47 CFR § 54.313(c)) 2010 Service Support Used to Build Encodaband Connect America Phase II Reporting (47 CFR § 54.313(c)) 2011 Service Support Used to Build Encodaband Connect America Phase II Reporting (47 CFR § 54.313(c)) 2012 Service Support Used to Build Encodaband Connect America Phase II Reporting (47 CFR § 54.313(c)) 2013 Service Support Used to Build Encodaband Connect America Phase II Reporting (47 CFR § 54.313(c)) 2015 Interim Progress Certification 2010 Interim Progress Certification 2010 Interim Progress Community Anchor Institutions to which began providing access to broadband service in the preceding calendar year. | <039> | Contact Email Address - Email Address of person Identified in data line <030> | 3004037313 EXC. |
| Connect America Phase II support as set forth in 47 CRR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate. Incremental Connect America Phase I reporting 2010b | RECONOCIO | | 도 집 집 집 집 집 집 집 집 집 집 집 집 집 집 집 집 집 집 집 |
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| Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)} 2012 | <2011b> | Attachment (47 CFR § 54.313(b)(1) } | |
| 2012> 2013 Frozen Support Calculation (47 CFR § 54.313(c)(1)) 2013> 2014 Frozen Support Calculation (47 CFR § 54.313(c)(2)) 2015 Frozen Support Calculation (47 CFR § 54.313(c)(3)) 2015 and future Frozen Support Calculation (47 CFR § 54.313(c)(4)) Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(c)(4)) Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d)) Certification Support Used to Build Broadband Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification Sth year Broadband Service Certification InterIm Progress Certification Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)[3](ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. Interim Progress Community Anchor Institutions | | | Name of Attached Document(s) Listing Required Information |
| 2014 Frozen Support Calculation (47 CFR § 54.313(c)(2)) 2015 2016 and future Frozen Support Calculation (47 CFR § 54.313(c)(3)) 2015 2016 and future Frozen Support Calculation (47 CFR § 54.313(c)(4)) Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d)) 2016 Certification Support Used to Build Broadband Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification Sth year Broadband Service Certification InterIm Progress Certification Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)[3](ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. | | Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a)) | |
| 2015 Frozen Support Calculation (47 CFR § 54.313(c)(3)) 2016 and future Frozen Support Calculation (47 CFR § 54.313(c)(4)) Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d)) Certification Support Used to Build Broadband Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification 5th year Broadband Service Certification InterIm Progress Certification Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(iii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. | <2012> | 2013 Frozen Support Calculation (47 CFR § 54.313(c)(1)) | |
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| Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification 5th year Broadband Service Certification InterIm Progress Community anchor Institutions Consect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification Sth year Broadband Service Certification InterIm Progress Community anchor Institutions Consect America Phase II Reporting (47 CFR § 54.313(e)) Sth year Broadband Service Certification InterIm Progress Community anchor Institutions InterIm Progress Community Anchor Institutions InterIm Progress Community Anchor Institutions | <2015> | 2016 and future Frozen Support Calculation (47 CFR § 54.313(c)(4)) | |
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| Connect America Phase II Reporting (47 CFR § 54.313(e)) 3rd year Broadband Service Certification 5th year Broadband Service Certification Interim Progress Certification Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(III), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. Interim Progress Community Anchor Institutions | <2015× | | |
| 3rd year Broadband Service Certification 5th year Broadband Service Certification 1 1 1 1 1 1 1 1 1 | ~2010> | | |
| 5th year Broadband Service Certification 1nterIm Progress Certification Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. 1nterim Progress Community Anchor Institutions | <2017× | | |
| <2019> InterIm Progress Certification <2020> Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. <2021> Interim Progress Community Anchor Institutions | | Sid year Si Gaddana Service Certification | |
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| | | Please check the box to confirm that the attached document(s), on lingursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support addresses of community anchor institutions to which began providing | ne 2021, contains the required information shall provide the number, names, and g access to broadband service in the |
| | <2021> | Interim Progress Community Anchor Institutions | |
| | | | Name of Attached Documents Listing Required Information |

| (3000) Ra | nte Of Return Carrier Additional Documentation | | FCCFórm 481 |
|-----------|--|--|--|
| Data Coll | ection Form | | OMB Control No. 3060-0986/OMB Control No. 3060-0819 |
| 935 | | | July 2013 |
| <010> | Study Area Code | | |
| <015> | Study Area Name | 170200 PYMATUNING IND TEL | |
| <020> | Program Year | 2016 | |
| <030> | Contact Name - Person USAC should contact regarding this data | Amanda Molina | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 9044037533 ext. | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | amolina@townes.net | |
| CHECK | Nutrical Transplant content is the property of the second | nt to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring the information reported on this form and in the documents attach | compliance with the financial reporting requirements set forth in 47 |
| | | 170200pa3010.pdf | |
| (3010) | Progress Report on 5 Year Plan Milestone Certification (47 CFR § 54.313(f)(1)(i)) | | |
| | the state of the s | Name of Attached Document Listing Required Inform. | ation |
| | Disease shoot this has to confine that the attended decourse (4) on the | | |
| (3011) | Please check this box to confirm that the attached document(s), on line § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addr providing access to broadband service in the preceding calendar year. | sortz contains the required information pursuant to esses of community anchor institutions to which began | |
| | | 170200pa3012.pdf | |
| | | | |
| (3012) | Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii)) | | |
| | | | |
| | | Name of Attached Document Listing Required Information | |
| (3013) | Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) | (Yes/No) | ₹\$~₹ |
| (3014) | If yes, does your company file the RUS annual report | (Yes/No) |)(•) |
| Please | check these boxes to confirm that the attached document(s), on line 301 | 7, contains the required information pursuant to § 54.313(f)(| 2) compliance requires: |
| (3015) | Electronic copy of their annual RUS reports (Operating Report for | | |
| | Telecommunications Borrowers) | | |
| (3016) | Document(s) for Balance Sheet, Income Statement and Statement of Co | ash Flows | |
| | | | |
| (3017) | If the response is yes on line 3014, attach your company's RUS annual | | 3 |
| | report and all required documentation | 1 | |
| 72 | 2 | | |
| | | Name of Attached Document Listing Required Information | 36 |
| (3018) | If the response is no on line 3014, is your company audited? | (Yes/Na) | |
| | if the response is yes on line 3018, please check the boxes below to | | |
| 7200932 | confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains | | (<u>1000.000</u>) |
| (3019) | Either a copy of their audited financial statement; or (2) a financial report in a | format comparable to RUS Operating Report for Telecommunication | ns |
| (3020) | Document(s) for Balance Sheet, Income Statement and Statement of C | Seeh Floure | |
| | | | = |
| (3021) | Management letter and audit opinion issued by the independent certified p | ublic accountant that performed the company's financial audit | 41 |
| | If the response is no on line 3018, please check the boxes below | | |
| | to confirm your submission, on line 3026 pursuant to § 54.513(f)(2), contains: | | , |
| | | | |
| (3022) | | | |
| | independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications | | |
| | Borrowers. | | |
| (3023) | | | |
| Possi | public accountant | | |
| (3024) | Underlying information subjected to an officer certification. | | اخا |
| (3025) | | ash Flows | " |
| | | 170200pa3026.pdf | |
| 0,533,61 | contract that south an even of | | 1 |
| (3026) | Attach the worksheet listing required information | | 1 |
| | | | |
| (6) | | W | |

| (3000) Rate Of Return Carrier Additional Documentation (Oata Collection Form | OM6 Central No. 3060-0986/OM8:Control No. 3060-0815 |
|--|---|
| | tely2013 |

| <010> | Study Area Code | 170200 |
|-------|---|--------------------|
| <015> | Study Area Name | PYMATUNING IND TEL |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | Amanda Molina |
| <035> | Contact Telephone Number - Number of person Identified in data line <030> | 9044037533 ext. |
| <0392 | Contact Email Address - Email Address of nerson identified to data line 4030s | |

Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

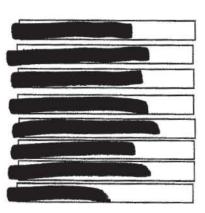
(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



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| NATIONAL PROPERTY. | don - Reporting Carrier Jection Form | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|--------------------|---|--|
| <010> | Study Area Code | 170200 |
| <015> | Study Area Name | PYMATUNING IND TEL |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | Amanda Molina |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 9044037533 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | amoline@townes.net |

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

| | s include ensuring the accuracy of the annual reporting requirements for universal service suppo |
|---|--|
| recipients; and, to the best of my knowledge, the information reporte | d on this form and in any attachments is accurate. |
| Name of Reporting Carrier: PYMATUNING IND TEL | |
| Signature of Authorized Officer: CERTIFIED ONLINE | Date 06/20/2015 |
| Printed name of Authorized Officer: Deborah Nobles | |
| Title or position of Authorized Officer: VP of Regulatory Affairs | |
| Telephone number of Authorized Officer: 9042590029 ext. | the second secon |
| Study Area Code of Reporting Carrier: 170200 | Filing Due Date for this form: 07/01/2015 |

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| | don - Agent / Carrier action Form | FCC Form 491 OMB Control No. 3060-0986/OMB Control No. 3060-0819 N/y 2013 |
|-------|---|---|
| <010> | Study Area Code | 170200 |
| <015> | Study Area Name | PYMATUNING IND TEL |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | Amanda Molina |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 9044037533 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | amolina@townes.net |

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

| I certify that (Name of Agent) | is authorized to submit the information reported on behalf of the reporting carrier. |
|--|---|
| also certify that I am an officer of the reporting carrier; agent; and, to the best of my knowledge, the reports as | consibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized provided to the authorized agent is accurate. |
| Name of Authorized Agent: | |
| Name of Reporting Carrier: | |
| Signature of Authorized Officer: | Date: |
| Printed name of Authorized Officer: | |
| Title or position of Authorized Officer: | |
| Telephone number of Authorized Officer: | |
| Study Area Code of Reporting Carrier: | Filing Due Date for this form: |

TO BE COMPLETED BY THE AUTHORIZED AGENT:

| Certification of Agent | t Authorized to File Annual Reports for CAF or LI | Recipients on Behalf of Reporting Carrier |
|---|---|---|
| | thorized to submit the annual reports for universal service e reporting carrier; and, to the best of my knowledge, the | support recipients on behalf of the reporting carrier; I have provided information reported herein is accurate. |
| Name of Reporting Carrier: | | |
| Name of Authorized Agent or Employee of Agent: | | |
| Signature of Authorized Agent or Employee of Agent: | | Date: |
| Printed name of Authorized Agent or Employee of Agent: | | |
| Title or position of Authorized Agent or Employee of Agen | nt | |
| Telephone number of Authorized Agent or Employee of A | gent: | |
| Study Area Code of Reporting Carrier: | Filing Due Date for this form: | |

Attachments

LINE 112: PROGRESS REPORT

REDACTED IN ENTIRETY

Carrier Name:

Pymatuning Independent Telephone Company

Carrier SPIN: Carrier SAC: 143001390 170200

Operating State:

Pennsylvania

Line 510:

Service Quality Standards and Consumer Protection Rules Compliance for

voice and broadband services

Pymatuning Independent Telephone Company ("PITC" or "the Company") complies with the following rules in the Subchapter E of the Pennsylvania Code of State Regulations:

§63.51 - §63.65

Telephone Quality of Service Standards

PITC complies with the following federal consumer protection rules and regulations:

FCC 47 C.F.R. §§64.2001-64.2011 – Customer Proprietary Network Information ("CPNI")
FTC 16 C.F.R. §681.2 – Identity Theft Red Flags and Address Discrepancies Under the Fair and
Accurate Credit Transactions Act of 2003

All customer protection and disclosures established by the Fair Credit Reporting Act (15 U.S.C. §§1681. et seq.) and the Truth in Lending Act (15 U.S.C. §§1601, et seq.)

The Company has a CPNI Policy Manual detailing and enforcing the requirements of the federal CPNI rules. Each year, the CPNI Compliance Officer (1) communicates with the Company's attorneys and/or consultants regarding CPNI responsibilities, requirements and restrictions; (2) supervises the training of Company employees and agents who use or have access to CPNI; (3) supervises the use, disclosure, distribution or access to the Company's CPNI by independent contractors and joint venture partners; (4) maintains records regarding the use of CPNI in marketing campaigns; and (5) receives, reviews and resolves questions or issues regarding use, disclosure, distribution or provision of access to CPNI. The CPNI Compliance Officer certifies compliance annually with the FCC by March 1.

The Company has an Identity Theft Prevention Program ("the Program") that was approved by the Board of Directors in September 2008. The Board appointed Red Flag Coordinator is responsible for updating the Program as necessary; the day-today supervision of the Program; training Company employees regarding their responsibilities with respect to the Program; and responding to employee questions and concerns regarding identity theft or the Program. The Red Flag Coordinator is required to annually prepare an Identity Theft Prevention Program Compliance Report for the Board's approval by October 1. The Identity Theft Prevention Program Compliance Report evaluates the effectiveness of the Program; the nature and extent of the Company's service provider arrangements and their impact on the effectiveness of the Program; reports any significant incidents involving identity theft and the Company's response to such incidents; and provides recommendations to the Board for periodic reviews of the Program and the adoption of material changes and other revisions, modifications and updates to the Program.

The Company is subject to consumer protection obligations for broadband services under federal law. These obligations include, but are not limited to, the following: public disclosure of accurate information regarding network management practices, performance, and commercial terms of broadband internet access services; as a means of providing sufficient information for consumers to make informed choices regarding use of such services, and for content, application, service and device providers to develop, market, and maintain internet offerings as specified in F.C.C. 47 C.F.R. Part 8 §8.3.

Carrier Name:

Pymatuning Independent Telephone Company

Carrier SPIN:

143001390

Carrier SAC: Operating State: 170200 Pennsylvania

Line 610:

Functionality in Emergency Situations for voice and broadband services

Pymatuning Independent Telephone Company ("PITC" or "the Company") has an Emergency Operations Plan ("EOP" or "the Plan") that addresses the requirements for continuity of service and systematic restoration of service after loss of service due to an emergency. The EOP is administered and maintained by a member of senior management of the parent company, Townes Telecommunications, Inc., and is reviewed annually to ensure that each applicable section is accurate and any changes or updates to the Plan are made on a timely basis.

An Emergency Director has been authorized to implement the provisions of the EOP. The Emergency Director conducts training with employees and is responsible for ensuring that all new employees are provided a 30 minute overview of the Plan as part of their orientation. Specific supervisory personnel receive additional intense instructions regarding special areas of the Plan.

The Plan established an Emergency Committee made up of senior management and key company personnel, who upon notification by the Emergency Director that a potential emergency exists, convene to declare an emergency, notify affected parties and assume control of restoration of service efforts.

An emergency control center is established at the Company's business office, which is equipped with a back-up power generator and a wireless telephone set. Depending upon the severity and type of emergency and the safety of the emergency location, a control center may be established at the site of the event.

In case of power outages, batteries in the central office will last on average from 4-8 hours depending on how many lines (AMP load) are served at that particular location. The stand-by generator has 24 hour diesel capacity and small generators are available to be put on smaller concentrators if power is lost. The small generators have to be refueled every few hours.

The Company's standby generators and battery back-up support both voice and broadband network equipment should an emergency situation occur.

<703>

| 200136000000 | re Offerings Including Voice Rate Data ection Form | FCC Form 481 GMB Control No. 3050-0986/GMB Control No. 3050-0819 July 2013 |
|--------------|---|--|
| <010> | Study Area Code | 170200 |
| <015> | Study Area Name | PYNATURING IND TEL |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | Amanda Molina |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 9044037533 dxt. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | amolina@tovnes.net |
| 0-2000-00 | | |
| <701> | Residential Local Service Charge Effective Date 1/1/2015 | |
| <702> | Single State-wide Residential Local Service Charge | |

| State | <a2> Exchange (ILEC)</a2> | SAC (CETC) | Rate Type | Residential Local Service Rate | State Subscriber Line Charge | State Universal Service Fee | Mandatory Extended Area Service Charge | Total per line Rates and Fee |
|-------|---------------------------|------------|-----------|---------------------------------------|------------------------------|-----------------------------|---|------------------------------|
| PA | Pymatuning | | FR | 16.9 | 0.0 | 0.0 | 0.0 | 16.9 |
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| (710) Broadband Price Offerings Data Collection Form | | FCC Form 481 OM8 Control No. 3060-0985/OM8 Control No. 3060-0819 July 2013 |
|---|--|--|
| | The state of the s | The state of the s |

| <010> | Study Area Code | 170200 | • |
|-------|---|--------------------|-------|
| <015> | Study Area Name | PYMATUNING IND TEL | |
| <020> | Program Year | 2016 | |
| <030> | Contact Name - Person USAC should contact regarding this data | Amanda Molina | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 9044037533 ext. | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | amolina@townes.net | |

| State | Exchange (ILEC) | Residential Rate | State Regulated Fees | Total Rates and Fees | | Broadband Service -Upload Speed (Mbps) | Usage Allowance (GB) | Usage Allowance Action Taken When Limit Reached (select) |
|-------|-----------------|---------------------|-------------------------|-------------------------|---------|---|-------------------------|--|
| PA | All | 17.8 | 0.0 | 17.8 | 1.0 | 0.512 | 999999.0 | Other, No Usage Limits |
| PA | All | 27.8 | 0.0 | 27.8 | 2.0 | 0.512 | 999999.0 | Other, No Usage Limits |
| PA | All | 37.8 | 0.0 | 37.8 | 4.0 | 1.0 | 999999.0 | Other, No Usage Limits |
| | | | | | | | | |
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| Essay S | erating Companies ection Form | | | | | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 | |
|--|--|---|--------------------|--------|-------------|--|--|
| <010> | Study Area Code | | 170200 | | 400 | | |
| <015> • | Study Area Name | 4 | PYMATUNING IN | ND TEL | | , , | |
| <020> | Program Year | | 2016 | | | | |
| <030> | Contact Name - Person U | SAC should contact regarding this data | Amanda Molina | | | | |
| <035> | Contact Telephone Numb | per - Number of person identified in data line <030> |)> 9044037533 ext. | | | | |
| <039> Contact Email Address - Email Address of person Identified in data line <030> amolina@townes.net | | | | | | | |
| <810> | Reporting Carrier | Pymatuning Independent Telephone Company | | | | | |
| <811> | Holding Company | Townes Telecommunications, Inc. | | | | | |
| <812> | Operating Company | Pymatuning Independent Telephone Company | | | | | |
| <813> | | <a15< td=""><td>SECTION SECTION</td><td>×a2></td><td></td><td>⇔</td></a15<> | SECTION SECTION | ×a2> | | ⇔ | |
| | | Affiliates | | SAC | Doing | g Business As Company or Brand Designation | |
| | Choctaw Te | lephone Company | | 421893 | N/A | | |
| | Electra Te | lephone Company | | 442069 | N/A | | |
| | Haxtun Tel | ephone Company | | 462190 | N/A | | |
| | MoKan Dial | , Inc Kansas | | 411807 | N/A | | |
| | MoKan Dial | , Inc Missouri | | 421807 | N/A | | |
| | Northeast | Florida Telephone Company | | 210335 | NEFCOM | | |
| | Pymatuning | Independent Telephone Compa | any | 170200 | N/A | | |
| | Tatum Tele | phone Company | | 442150 | N/A | | |
| | Walnut Hil | 1 Telephone Company | | 401729 | N/A | | |
| | MoKan Comm | unications, Inc | | | N/A | | |
| | NEFCOM Lon | g Distance, Inc. | | | NEFCOM Comm | unications, Inc. | |
| , | PT Communi | | | N/A | | | |
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Carrier Name:

Pymatuning Independent Telephone Company

Carrier SPIN: Carrier SAC: 143001390

Operating State:

170200 Pennsylvania

Line 1210:

Terms and Conditions for Lifeline Program Customers

Pymatuning Independent Telephone Company ("PITC" or "the Company") complies with the FCC CFR 47 §§54.4, Universal Service Support for Low-Income Customers. The Company has developed a Lifeline Program Policy & Procedures Manual, which incorporates both the federal and state Low-Income Program requirements. Lifeline is a non-transferable retail service offering for which qualifying low-income consumers receive a \$9.25 federal discount and a \$3.50 state discount on flat rated basic local telephone service, whether it is purchased on a stand-alone basis or as part of a bundled service that includes voice and data services and optional calling features. Lifeline customers are charged a separate charge for toll calls, but are provided Toll Blocking free of charge if they elect to subscribe to the service. The Lifeline supported services are as shown below:

| | PITC | |
|---|--------|-----------------------------|
| Residence Access Line | 15.65 | |
| Touch Tone Service | 1.25 | |
| Federal SLC | 6.50 | |
| Total Monthly Rate | 23.40 | - |
| Lifeline Discounts to Total Monthly Rate: | 62 | |
| Federal Flat Rate Lifeline Support | (9.25) | FCC 497: Lifeline Worksheet |
| Total Lifeline Service Monthly Rate | (9.25) | |
| Net Monthly Local Service for Lifeline Customer | 14.15 | [2] * 1] |

Additional Services:

Toll Blocking is free to Lifeline customers who subscribe to this service.

The company is required to include the Lifeline Service Program in their Local Exchange Tariff. The rates for basic local residential service are also contained in the Local Exchange Tariff and the rates for the federal SLC are included in the NECA Tariff No. 5. Changes to any of these rates must be approved by the appropriate regulatory agency.

Carrier Name:

Pymatuning Independent Telephone Company

Carrier SPIN:

143001390

Carrier SAC: Operating State: 170200 Pennsylvania

Line 3010:

Milestone Certification

Pymatuning Independent Telephone Company ("Pymatuning" or "the Company"), pursuant to, and in accordance with, F.C.C. 47 C.F.R § 54.202(a) and § 54.313(f)(1)(i), hereby submits this letter of certification that the Company is taking reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 4Mbps downstream/1Mbsp upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas, and that requests for such service are met within a reasonable amount of time.

Carrier Name:

Pymatuning Independent Telephone Company

Carrier SPIN:

143001390

Carrier SAC: Operating State: 170200 Pennsylvania

Line 3012:

Data on Community Anchor Institutions

Pymatuning Independent Telephone Company ("Pymatuning" or "the Company"), pursuant to, and in accordance with, F.C.C. 47 C.F.R § 54.313(f)(1)(ii), hereby submits the number, names, and addresses of community anchor institutions to which the Company newly began providing access to broadband service in the preceding calendar year.

 Pymatuning Independent Telephone Company does not have any newly served community anchor institutions to submit because all community anchor institutions are already being served.

LINE 3026: FINANCIAL WORKSHEET REDACTED IN ENTIRETY